2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 15, 2013
Secretary of State
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Entity Name: FLORIDA PAIN INITIATIVE, INC.

Current Principal Place of Business:

1337 HAMPSTEAD TERRACE
OVIEDO, FL 32765

Current Mailing Address:

P.O. BOX 780755
ORLANDO, FL 32878

FEI Number: 31-1482137

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

GARCIA, CONNIE
1337 HAMPSTEAD TERRACE
OVIEDO, FL 32765 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	PD
Name	GARCIA, CONNIE
Address	P.O. BOX 780755
City-State-Zip:	ORLANDO FL 32878

Title	D
Name	DEMPSEY-WALLS, SUSAN
Address	1400 S. ORANGE AVE
City-State-Zip:	ORLANDO FL 32806

Title	D
Name	GARCIA, RAFAEL I
Address	3127 BIRMINGHAM BLVD
City-State-Zip:	ORANDO FL 32829

Title	D
Name	ROGERS, ANGELA PHARMD
Address	701 WEST COCOA BEACH CAUSEWAY
City-State-Zip:	COCOA BEACH FL 32931

Title	D
Name	VENTURA, VALERIE
Address	1414 KUHL AVENUE
City-State-Zip:	ORLANDO FL 32806

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: RAFAEL GARCIA — BOD / TREASURER — 04/15/2013

Electronic Signature of Signing Officer/Director Detail — Date